UNITED STATES PATENT & TRADEMARK OFFICE Washington, D.C. 20231

REQUEST FOR PATENT FEE REFUND						
1 Date of Request: \$\int 5/05 2 Serial/Patent # 10 / 523/07						
3 Please refund the following fee(s):		4 PAF	ER BER	5 DATE FILED	6 AMOUNT	
X	Filing				\$ 100.00	
	Amendment				\$	
	Extension of Time				\$	
	Notice of Appeal/Appeal				\$	
	Petition				\$	
	Issue				\$	
•	Cert of Correction/Terminal Disc.				\$	
	Maintenance				\$	
	Assignment				\$	
	Other				\$	
Done		7 TOTAL AMOUNT OF REFUND			\$ 100.00	
		8 TO BE REFUNDED BY:				
10 REASON:			Treasury Check			
X	Overpayment	Credit Deposit A/C #:				
	Duplicate Payment		9 0	1 2 2	448	
	No Fee Due (Explanation):					
•						
11 REFUND REQUESTED BY:						
signature: Darrell Cottman title: Paralegal signature: Darrell Cottman phone: 703-308-9140 x203						
SIGNATURE: Novell (attrac PHONE: 703-308-9140 x203						
OFFICE:						
THIS SPACE RESERVED FOR FINANCE USE ONLY:						
APP	APPROVED: DATE:					

Instructions for completion of this form appear on the back. After completion, attach white and yellow copies to the official file and mail or hand-carry to:

PORM PTO 1577 (01/90) Office of Finance Refund Branch Crystal Park One, Room 802B